electorate. The campaign in behalf of the measure, led by the antivivisectionist groups, and supported by one of the country's leading newspaper chains—which fairly outdid itself in fullpage display of emotional articles about "man's dear friend, the dog!"-and further fortified through expensive billboard, radio and other advertising media, was carried on in most aggressive fashion. That these efforts failed but adds to the greatness and glory of the decisive victory attained. So once again, not in legislative chambers, but this time on a direct appeal to the people, the proponents of this type of law enactment have been deservedly worsted.

Antivivisectionists Failed in Efforts to Make California a Guinea Pig.—Elsewhere in this number of California and Western Medicine appear some references to the battle, and these, with others that have been given space in recent issues, complete the story of the 1938 struggle against those who, from emotional or other incentives, would have made the State of California the guinea pig for a brand of legislation, to be tried out, one after the other, in the years to come, in other states of the Union. With the experience gained in this last of the many fights which have been made necessary, each biennium, as the antivivisectionist cohorts repeatedly have marshalled their supporters at legislative sessions behind proposed statutes that would have seriously handicapped scientific medicine in California, it should be possible for physicians in other commonwealths (possessing in proportion far fewer faddists than the large number who, in search of climatic and what-not lures, are now resident in our State) to wage successful battle against similar machinations.

The present fight is now over, with results, so far as prevention of law enactment is concerned, entirely pleasing. The money and efforts necessary to defeat Proposition Two, would give rise to less satisfactory reflections, were it not for the issues involved, so important to the public health interests and welfare of the people. Those ends amply justified the ways and means found necessary, in order to achieve such a victory.

Thanks of the Association to All Who Rendered Aid.—It is not possible to name all who are worthy of praise. Mention has already been made of the California Society for the Promotion of Medical Research and the Public Health League of California. In every county medical society of the California Medical Association, officers and committees worked unremittingly in the distribution of post cards to be sent to patients, and in the dissemination of educational literature and other printed matter, for offices and homes, and for various display. The loyal and generous support of the members of the Woman's Auxiliaries is worthy of special mention, their contribution being most difficult to estimate in terms of money, because so massively and wholeheartedly given. Credit is also due to local groups who, on their own initiative, supplemented the work of the central distributing centers in San Francisco and Los Angeles, by devising special literature and placement of advertisements in the local press. To all who gave aid, the thanks of the California Medical Association are given. The coöperation everywhere rendered was most gratifying to the Association's Council, because that body was called upon to determine the kind and amount of expenditures to be authorized. The decided endorsement, by the citizens at large, of the stand taken by California's medical profession, especially at a time when civic vagaries of all kinds are so frequently promoted and espoused, is most reassuring. It permits physicians to look ahead, and with confidence, towards other problems which must be faced and solved.

DEL MONTE ANNUAL SESSION: MAY 1-4, 1939

Scientific Papers and Exhibits, and Hotel Reservations.—Members of the Association who have in mind papers which they desire to present before one of the twelve scientific sections at next year's Del Monte annual session, should communicate promptly with the Secretary of the proper section.*

Request is also made that members wishing to display exhibits in the scientific section, should write promptly to the Association Secretary. Members of the Committee on Scientific Work

may also be consulted.†

Because of the possibility of medical service plans being inaugurated, as referred to elsewhere in this department, the attendance at Del Monte will probably be greater than usual. Members who intend to be present, therefore, should send their request for reservations to the Hotel Del Monte, Del Monte, California, at an early date.

The prompt cooperation of members in the items referred to above is requested and will be appreciated.

VISITATION BY PRESIDENT W. W. ROBLEE TO COUNTY MEDICAL SOCIETIES IN NORTHERN CALIFORNIA

Official Position Means Official and Personal Responsibility and Service.—"All is not gold that glitters," and, likewise, official positions in state and county medical societies are by no means, empty honors.

True, to be elevated to office in a medical society is an honor; but if official service is not rendered in return, promotion to office is neither a credit for the society or the recipient. Organized medicine, in the present day, faces too many serious problems to permit any physician to accept office, unless it is in his heart and mind, to give service in return to the fellows who so honored him.

President Roblee's Two Thousand-Mile Journey.—It was our privilege to accompany

^{*} Names of officers of the scientific sections are printed in each issue, on advertising page 6.

[†] For names of members, see committee roster on advertising page 2.

President W. W. Roblee of Riverside in a journey of two thousand miles, through the northern section of California, as he made a tour of visitations to the county medical societies in that portion of the State. It was most heartening to learn, at first hand, how earnestly and ably our colleagues are serving the people of their districts, and how interested and alert they are to present-day issues in scientific and organized medicine. To attend some of the smaller society meetings, and be present with colleagues who had convened especially to meet the president of the California Medical Association, and hear the message brought by him, some members traveled as much as one hundred miles, often over difficult mountain roads. For, let it not be forgotten that the problems in some of these more sparsely settled districts are as important to the physicians there resident, as are those confronting members who live in the larger urban and metropolitan areas. Be it also said, to the credit of our colleagues in these districts, that they are as keen to meet all the responsibilities to their profession and to their patients as are physicians living in the large cities. As an example, the story revealed by practically every society visited, of wholehearted and wise cooperation in battling the State Humane Pound Act, made one take more than ordinary pride in what has been accomplished.

A few words, in addition, on the generous donation of time and effort of President Roblee who, in this particular visitation tour, left his practice for more than two weeks. It should be remembered that officers and members of the Council, in attending meetings which total weeks, if not months, each year, are also out of pocket the money they would have earned had they been active in their own offices; their reward being the pleasure that comes from so serving their fellows and in promoting public health and medical interests. Truly, today, in contrast to years ago, when organized medicine, in so far as official duty was concerned, expressed itself often, in little more than about once each month, presiding at a medical meeting, is a very different kind of responsibility. From which the conclusion may be drawn that a physician who is not willing to serve, and to serve generously, should decline official positions. Scientific and organized medicine alike need active workers, and only such should accept office.

Other State Association and Component County Society News.—Additional news concerning the activities and work of the California Medical Association and its component county medical societies is printed in this issue, commencing on page 470.

EDITORIAL COMMENT[†]

X-RAY THERAPY FOR SINUSITIS

The treatment of chronic paranasal sinusitis has always been a difficult and, at times, a rather discouraging problem in the practice of medicine. Local medical treatment, short-wave diathermy, and surgery have all been used with varying degrees of success. Any rational measure which will improve this distressing condition is worthy of consideration.

The good results secured with x-ray therapy in other inflammatory lesions, such as boils and carbuncles, suggested that this mode of treatment might be of value in the treatment of sinusitis. The reports in the literature are quite encouraging. Butler and Wooley 1 report one hundred cases of sinusitis treated with x-ray. Thirty-one per cent became symptom-free, 50 per cent were improved, and 19 per cent showed no change. In a second series of 450 cases these authors report 36 per cent symptom-free, 55 per cent improved, and 9 per cent unchanged. Rathbone 2 treated seventy children with sinus disease and stated that 57 per cent were cured, 28 per cent were improved, and in 15 per cent there was no change. These cases were followed from one to three and one-half years. Good results have also been reported by others.3-6

During the past few years we have treated quite a number of cases of sinusitis with radiation and have been favorably impressed with the outcome. X-ray therapy is not a panacea or cure-all for sinusitis; however, the results indicate that it is a valuable adjunct in treatment, and a more general use of x-ray therapy for this condition is warranted.

The effect of radiation on sinusitis has been studied experimentally in cats (Fenton-Laisell). It appears to be due primarily to an early destruction of the lymphocytes in the infected lining membrane. There is a gradual reduction in the thickness of the lining mucous membrane, probably due to the destruction and removal of innumerable lymphocyte cells. The cilia and cellular elements of the mucous membrane show no evidence of injury from the radiation. The amount of radiation administered is so small as to be entirely free from danger, not producing even the slightest erythema. Ordinarily three or four treatments are sufficient.

The cases that respond best are those with chronic low-grade sinusitis, with edema and thickening

1937.
3 Osmond, John D.: Roentgen Therapy of Acute Infections of the Antrum and Frontal Sinus, Am. J. Roentgenol., 10:374 (May), 1923.
4 Hodges, Fred M.: Roentgen Therapy of Infections of the Nasal Accessory Sinuses, Am. J. Roentgenol., 39:578 (April), 1938.
5 Smith, H. B., and Nickel, A. C.: The Treatment of Subacute and Chronic Sinusitis by Roentgen Radiation, Am. J. Roentgenol., 39:271 (Feb.), 1938.
6 Williams, A. J., and Bryan, L.: Roentgen Therapy in the Treatment of Nonspecific Respiratory Diseases, Radiology, 26:45 (Jan.), 1936.

In 1937 there were 80,322 deaths registered in California—the largest number ever to be registered during a single year. The death rate was 12.3 per thousand estimated population, which is the highest death rate for California since 1928, when the rate was 12.5. The pandemic of influenza in 1918 brought the highest death rate ever recorded in California, 17.7 per thousand population. There were 57,683 deaths registered that year, 15,600 more deaths than were recorded during the preceding year. than were recorded during the preceding year.

[†]This department of California and Western Medicine presents editorial comments by contributing members on items of medical progress, science and practice, and on topics from recent medical books or journals. An invitation is extended to all members of the California Medical Association to submit brief editorial discussions suitable for publication in this department. No presentation should be over five hundred words in length.

1 Butler, F. E., and Wooley, I. M.: Roentgen Therapy in Chronic Sinusitis, Radiology, 23:528 (Oct.), 1934.

2 Rathbone, R. Rhett: Roentgen Therapy of Chronic Sinusitis in Children, Am. J. Roentgenol., 38:102 (July), 1937.